

Patricia Booker

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)						SERIAL NO. <i>10/599612</i>	FILING DATE
						APPLICANT(S)	

CLAIMS

	AS FILED		AFTER 1 <sup>ST</sup> AMENDMENT		AFTER 2 <sup>ND</sup> AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1		1			
2		1				
3		2				
4		2				
5		2				
6		3				
7		1				
8		1				
9		2				
10		2				
11		2				
12		2				
13		2				
14	1		1			
15		1				
16		1				
17		2				
18		1				
19		1				
20		1				
21		1				
22	1		1			
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49						
50						
TOTAL IND.	3		3			
TOTAL DEP.	3		21			
TOTAL CLAIMS	34		24			

	AS FILED		AFTER 1 <sup>ST</sup> AMENDMENT		AFTER 2 <sup>ND</sup> AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						